

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		04/02/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TA	90867	5/8/01
RESPONSE FORMALITY REVIEW	CTP	1110	9-20-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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10/10/01  
 8/21/01  
 9/20/01